2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000069698

4114 29TH STREET E

PALMETTO, FL 34221

Address:

City-St-Zip:

Entity Name: OASIS MASSAGE THERAPY, LLC

FILED May 07, 2007 Secretary of State

| Current Principal Place of Business: 1301 10TH ST. E., SUITE E PALMETTO, FL 34221 | | New Principal Place of Business: |
|---|--|---|
| | | 1301 10TH ST. E., SUITE E PALMETTO, FL 34221 |
| Current Mailing Address: 301 10TH ST. E., SUITE E 301 10TH ST. E., SUITE E 201 10TH ST. E., | New Mailing Address: | |
| | | 1301 10TH ST. E., SUITE E PALMETTO, FL 34221 |
| In accordan | ce with s. 607.193(2)(b), F.S., the limited liab | ity company did not receive the prior notice. |
| 4114 29TH | I STREET E | |
| | | the purpose of changing its registered office or registered agent, or bot |
| SIGNATU | RE: | |
| | Electronic Signature of Register | d Agent Date |
| MANAGING | MEMBERS/MANAGERS: | ADDITIONS/CHANGES: |
| Title: Name: Address: City-St-Zip: | MILLER, SUSÁN GALES 4114 29TH STREET E | Title: () Change () Addition Name: Address: City-St-Zip: |
| Title: Name: | MGR () Delete SMOKE, RUSSEL D | Title: () Change () Addition Name: |

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SUSAN GALES MILLER MGR 05/07/2007